



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Darlene M. DREON, et al.

Title:

COMPOSITIONS AND METHOD

FOR REDUCTION OF

INFLAMMATORY SYMPTOMS

AND/OR BIOMAKERS IN

FEMALE SUBJECTS

Appl. No.:

10/612,118

Filing Date:

July 2, 2003

Examiner:

Not yet assigned

Art Unit:

1614

United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below. Rene Campos (Printed Name) (Signature) 6-15-04 (Date of Deposit)

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the

TRANSMITTAL

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

- Power of Attorney and Change of Correspondence Address in the above-identified application (2 pgs.);
- [X]Return Receipt Postcard.
- [X]The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such

extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date <u>June 11, 2004</u>

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